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appropriate. All further indicated unless correct maintenance fee notifications.	ed below or directed oth	ng the Patent, advance or nerwise in Block 1, by (a	ders and notification of i) specifying a new corre	maintenance tees verspondence address:	vill be mailed to the curren ; and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for
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20792 7590 11/30/2009 MYERS BIGEL SIBLEY & SAJOVEC PO BOX 37428 RALEIGH, NC 27627				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	₹	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/510,560 02/22/2000 Kenneth Iain Cumming 9701-6 3011 TITLE OF INVENTION: SOLID ORAL DOSAGE FORM CONTAINING AN ENHANCER						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/01/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
LUNDGREN, JEFFREY S		1639	424-408000	<b></b>		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Myers Bigel Sibley & Sajovec, P.A.  3			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Merrion Reasearch IIILimited  Dublin, Ireland						document has been filed for
Please check the appropriate assignee category or categories (will not be printed on the patent):						
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a. Applicant clair	atus (from status indicate ns SMALL ENTITY stat	us. See 37 CFR 1.27.			LL ENTITY status. See 37	
interest as shown by the	records of the United St	juired) will not be accepte ates Patent and Trademark	o Ironi anyone other than Coffice.	тие аррисант, а гед	istored adorney of agent; of	the assignee or other party in
Authorized Signature	MAVI	Tyline	>	Date <u>Nov</u>	ember 30, 2009	
Typed or printed name Robert A Schwartzman			Registration No. 50,211			
This collection of informan application. Confide submitting the complete this form and/or sugges Box 1450, Alexandria, Alexandria, Virginia 22	mation is required by 37 ontiality is governed by 33 ed application form to thations for reducing this butter in the 22313-1450. Do 313-1450.	CFR 1.311. The informati 5 U.S.C. 122 and 37 CFR e USPTO. Time will vary orden, should be sent to the ONOT SEND FEES OR	on is required to obtain or 1.14. This collection is of depending upon the ind the Chief Information Offi COMPLETED FORMS	retain a benefit by stimated to take 12 ividual case. Any c cer, U.S. Patent and TO THIS ADDRES	the public which is to file (a minutes to complete, includomments on the amount of a Trademark Office, U.S. Des. SEND TO: Commissione	nd by the USPTO to process) ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. or for Patents, P.O. Box 1450,

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